

TRANSFORMING PREVENTION

*Idaho Office of
Drug Policy*





MISSION – The Idaho Office of Drug Policy leads Idaho’s substance abuse policy and prevention efforts by developing and implementing strategic action plans and collaborative partnerships to reduce drug use and related crime, thereby improving the health and safety of all Idahoans.

VISION - The Idaho Office of Drug Policy envisions an Idaho free from the devastating social, health, and economic consequences of substance abuse.

AUTHORITY

The Office of Drug Policy (ODP) was established by HB 106 (Idaho Code 67-821). The purpose of the Office is to coordinate policy and programs related to drug and substance abuse.

Idaho Code 67-821.COORDINATION OF POLICY AND PROGRAMS RELATED TO DRUG AND SUBSTANCE ABUSE.

(1) There is hereby established in the Office of the Governor the "Office of Drug Policy." The administrator of the Office of Drug Policy shall be the official in the state designated to oversee and execute the coordination of all drug and substance abuse programs within the state of Idaho. The administrator shall be appointed by and shall serve at the pleasure of the governor, and shall be subject to confirmation by the state senate.

(2) The Office of Drug Policy shall:

(a) Cooperate and consult with counties, cities and local law enforcement on programs, policies and issues in combating Idaho’s illegal drug and substance abuse problem;

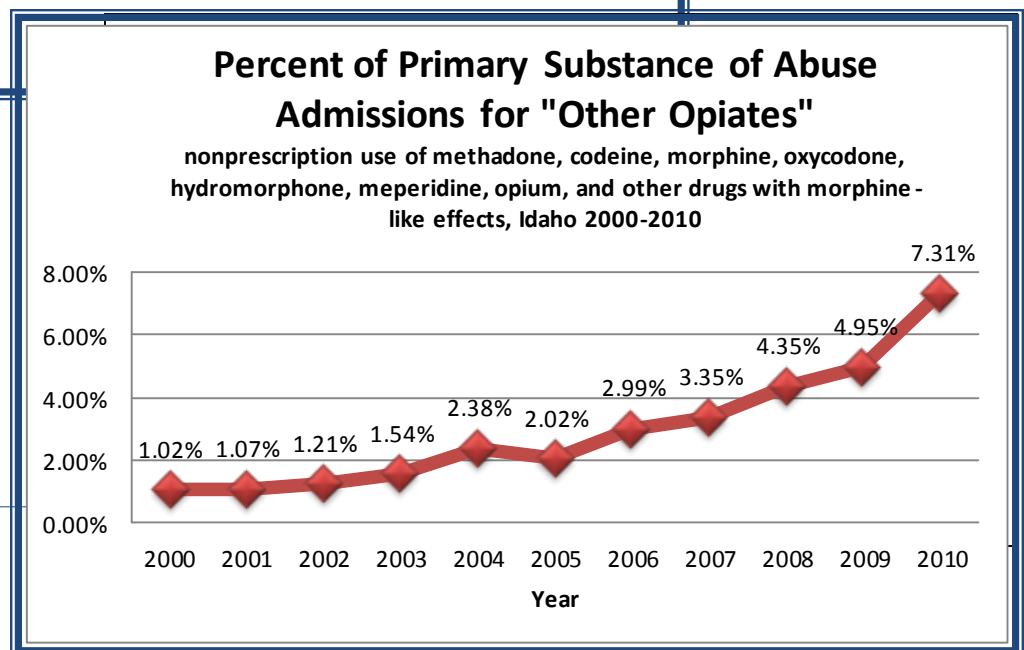
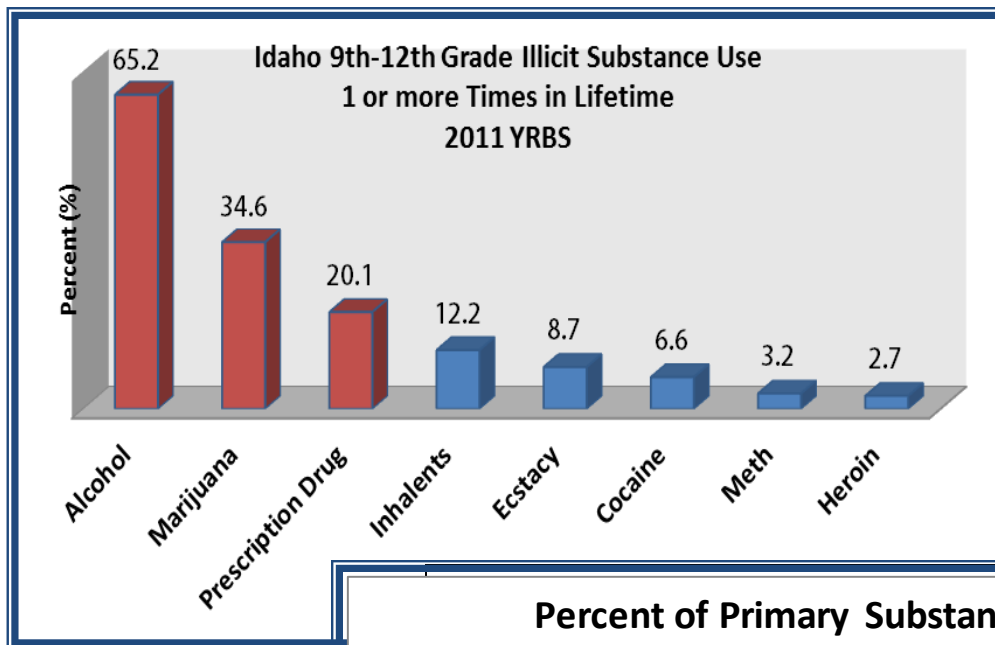
(b) Serve as a repository of agreements, contracts and plans concerning programs for combating illegal drug and substance abuse from community organizations and other relevant local, state and federal agencies and shall facilitate the exchange of this information and data with relevant interstate and intrastate entities;

(c) Provide input and comment on community, tribal and federal plans, agreements and policies relating to illegal drug and substance abuse; and

(d) Coordinate public and private entities to develop, create and promote statewide campaigns to reduce or eliminate substance abuse.

I. The Problem

Individual lives are lost or destroyed each day due to substance abuse. Families are ripped apart, children are abused and neglected, and parents grieve for lost children. Communities experience increased crime, lose productive citizens, and are burdened by out of control healthcare costs as a result of drug and alcohol abuse. The Office of Drug Policy, in partnership with the State Strategic Planning Committee, has identified Underage Drinking, Marijuana, Prescription Drugs, and other synthetic drugs as the core issues of abuse to be addressed.



\$6,120
per second

Estimated cost of drug use to
the U.S society in lost
productivity, health care
costs, etc. (Source: NDIC)

Underage Drinking

By far the number one substance abuse issue currently facing Idaho is underage drinking. Years of societal acceptance of youth drinking has created a social norm throughout our state that this is simply a “rite of passage.” However, with the overwhelming amount of recent scientific research on this topic, it has become clear that the consumption of alcohol by young people is dangerous, even deadly.

Because the decision making part of the brain, the prefrontal cortex, is not fully developed until a person’s early 20’s, and alcohol reduces the user’s ability to make good decisions, teen drinkers are at high risk of making poor decisions. This often leads to violence, accidents, unsafe sex, and other destructive behaviors.

DRINKING DATA

- 36% of students report current alcohol use
 - 18% of students report having their first drink before age 13
 - 22% of Idaho students report current binge drinking
 - 65% report having had at least one drink during their lifetime
- Idaho Youth Risk Behavior Survey, 2011

“The brain goes through rapid development and “wiring” changes during the ages of 12-21. The use of alcohol, by itself or with other drugs, can retard the normal growth and development of young people.”

-American Academy of Pediatrics, Alcohol: Your Child and Drugs

Marijuana

While most drug use has experienced a decline in numbers over the past several years, marijuana use has grown. This is likely due to the “medicalizing” of the drug currently experienced in our society. Idaho is nearly surrounded by states that have legalized marijuana use for medical purposes and this issue is being debated around the country. This has led to large groups of people who believe that marijuana use is harmless, and further, may have health benefits. However, research on the topic has repeatedly determined that marijuana use can lead to dependence, respiratory illness, poor academic performance, impaired cognitive function, impaired immune function, and mental illness.¹

MARIJUANA DATA

- 19% of students report current marijuana use
 - 35% of students report using marijuana at least once during their lifetime
- Idaho YRBS, 2011

“By characterizing the use of illegal drugs as quasi-legal, state-sanctioned, Saturday afternoon fun, legalizers destabilize the societal norm that drug use is dangerous.

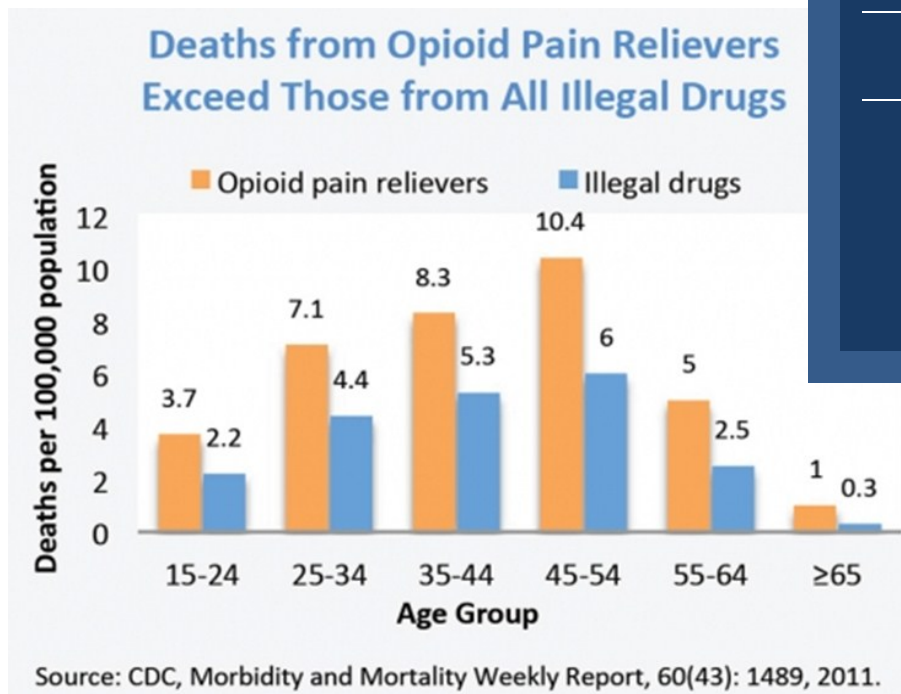
They undercut the goals of stopping the initiation of drug use to prevent addiction...

Children entering drug abuse treatment routinely report that they heard that ‘pot is medicine’ and, therefore, believed it to be good for them.”

-Andrea Barthwell, MD, former Deputy Director of the Office of National Drug Control Policy

Prescription Drugs

Perhaps one of the most alarming trends in substance abuse today is that of prescription drug abuse. According to results from the 2010 National Survey on Drug Use and Health (NSDUH), an estimated 2.4 million Americans used prescription drugs non-medically for the first time within the past year. This equates to approximately 6,600 new abusers per day. Clearly, this epidemic is growing at an extreme rate. This may be due to the fact that medications are viewed as safer than illicit drugs because they are prescribed by a doctor. However, if misused they can be just as deadly as street drugs. Because most homes have prescription drugs, they are easy to access and abuse. In fact, according to the Substance Abuse and Mental Health Services Administration, prescription drugs are now the drugs of choice for 12 and 13 year olds. When asked how prescription opioids were obtained for nonmedical use, more than half of the 12th graders surveyed said they were given the drugs or bought them from a friend or relative (Monitoring the Future, 2010).



RX DATA

20% of Idaho youth report taking a prescription drug without a doctor's prescription

-Idaho YRBS,

“Prescription drug abuse is the Nation's fastest-growing drug problem, and the Centers for Disease Control and Prevention has classified prescription drug abuse as an epidemic.”

-Office of National Drug Control Policy

Synthetic and Other Drugs

Although data on the use of synthetic drugs in Idaho is limited at this time, law enforcement reports and anecdotal evidence make clear that the use of these substances is widespread and dangerous. When drugs such as Spice and bath salts were first introduced in Idaho, they were easily purchased at head shops, gas stations, and via the internet. However, because of the proactive work of prevention organizations, law enforcement, Governor Otter, and the Idaho Legislature, state laws were quickly passed banning the manufacture, distribution, possession and use of these drugs. However, because manufacturers have attempted to evade legal restrictions by making subtle changes to the structures of these chemicals, constant monitoring of the situation is required and updates to legislation will likely be necessary in the future.

While drugs such as methamphetamine, heroin, cocaine, and ecstasy continue to be used by Idahoans, these numbers are somewhat smaller in comparison to those drugs previously mentioned. However, prevention organizations and law enforcement agencies must be constantly vigilant. Drug trends are sometimes cyclical and therefore it is necessary to maintain a consistent watch and stay aware of changes in use or distribution patterns of these substances.

“More people die, become ill, or are disabled from using these substances (alcohol, tobacco and illicit drugs) than from any other preventable behavior.”

– Alcohol Abuse: “Robbing Our Future”, San Diego Community Health Improvement Partners

OTHER DRUG DATA

- 9% of youth report using ecstasy at least once during their lifetime
 - 7% of youth report using cocaine at least once during their lifetime
 - 3% of youth report using methamphetamine at least once during their lifetime
 - 3% of youth report using heroin at least once during their lifetime
- Idaho YRBS, 2011



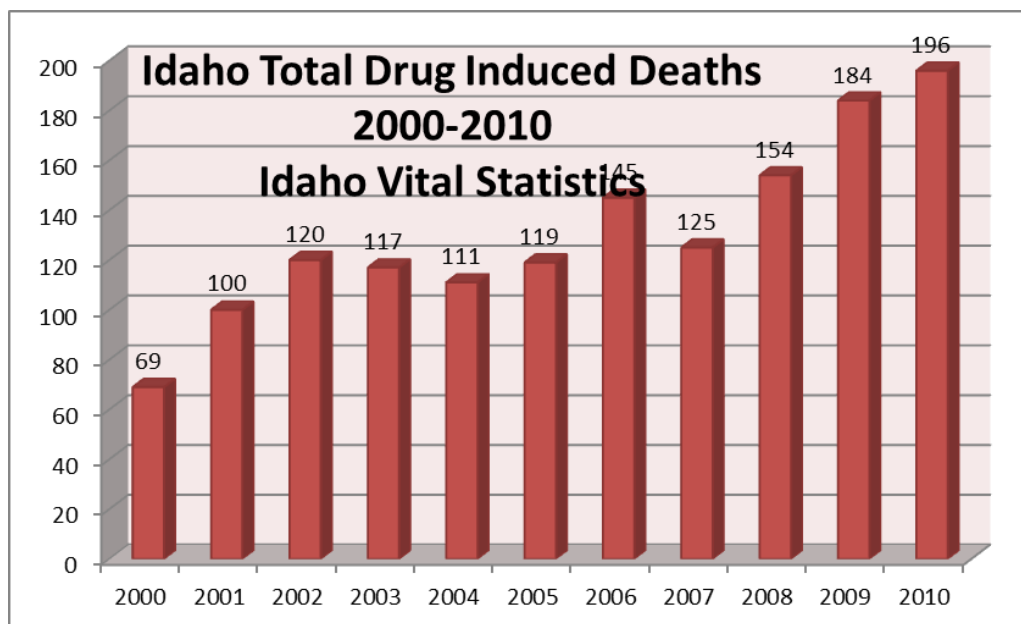
Serious Consequences of Substance Abuse

Substance abuse in itself is highly destructive. However, there are a multitude of devastating consequences related to the abuse of drugs and alcohol. Drug abuse is correlated to suicide, early unwanted pregnancy, school failure, delinquency, and transmission of sexually transmitted diseases, including HIV. In addition, underage drinking is a causal factor in a number of additional problems, including homicide, traumatic injury, drowning, burns, violent and property crime, fetal alcohol syndrome, alcohol poisoning, and the need for treatment for alcohol abuse and dependence.² The leading cause of death and disability among young people is motor vehicle crashes and a study done by Columbia University in 2012 shows 57 percent of fatal car crashes involve a driver who tested positive for alcohol or drugs.³

According to the Pacific Institute for Research and Evaluation's (PIRE) document "Underage Drinking in Idaho, The Facts" released in September 2011, underage drinking in Idaho led to the following:

- During 2009, an estimated 8 traffic fatalities and 369 nonfatal traffic injuries were attributable to driving after underage drinking.
- In 2009, an estimated 3 homicides; 3,600 nonfatal violent crimes such as rape, robbery and assault; and 6,300 property crimes including burglary, larceny, and car theft were attributable to underage drinking.
- In 2007, an estimated 3 alcohol involved fatal burns, drownings, and suicides were attributable to underage drinking.
- In 2009, an estimated 217 teen pregnancies and 5,892 teens having risky sex were attributable to underage drinking.

In addition to the devastating consequences of substance abuse, the sheer number of years of productive life lost in Idaho due to drug-induced deaths affects our economy and communities.



II. Prevention is the Solution

The courts are overwhelmed with cases, emergency departments are flooded with patients, and law enforcement officers are spending much of their time dealing with the effects of individuals abusing substances.

Effective, outcome-oriented prevention is the only viable, long-term solution to the continuous cycle of drug and alcohol abuse. It is imperative that organizations throughout Idaho engage in environmental strategies and evidence-based practices to transform their communities into safe and healthy places that discourage using substances and encourage making healthy life choices.

Cost Benefits of Prevention

The costs to society of substance abuse have been clearly documented. For example, according to a report from the University of Oklahoma Outreach's Southwest Prevention Center, in 1995, abuse of alcohol, tobacco and illicit drugs cost the United States approximately \$428 billion. This is roughly \$1600 for every American.⁴ In comparison, the 2004 budget for the U.S. military was \$400 billion.⁵

"A child who reaches age 21 without smoking, abusing alcohol or using drugs is virtually certain never to do so."

— Joseph A. Califano, Jr.

Chairman and President of the National Center on Addiction and Substance Abuse

Likewise, the cost benefits of prevention have been studied and documented. Research has shown that on average, \$2 to \$20 is returned in benefits for every \$1 spent on prevention programs. Further, for every \$1 spent to deliver a research-based prevention program, a savings of up to \$10 in treatment costs can be expected.⁶

In a research study examining the effects of environmental strategies in 2000, Holder found a cost benefit of \$2.88 for every dollar spent. Environmental, or population level, strategies that Holder studied included responsible beverage server training, increased drunk-driving enforcement, reduced availability to minors, and changes in local zoning to reduce access. His study is based on actual data collected in three communities and compared to similar control communities.⁷

Children who begin drinking at age 13 have a 45 percent chance of becoming alcohol dependent. Whereas, a person who starts drinking at the legal age of 21 has only a 7 percent chance of becoming addicted.

Prevention Partners

Idaho State Police-Alcohol Beverage Control	Idaho Prevention and Treatment Research
Idaho State Police-Drug Recognition Expert Program	Idaho College Health Coalition
Idaho State Police-Coeur d'Alene	Mothers Against Drunk Driving
Boise Police Department	Idaho Drug Free Youth
Meridian Police Department	Northwest Alcohol and Substance Abuse Conference
Community Coalitions of Idaho	Idaho Regional Alcohol Drug Awareness Resource
Treasure Valley Alcohol Drug Coalition	Project Filter
Bonneville Youth Development Council	ID Meth Project
Meridian Mayor's Anti-Drug Coalition	Idaho Transportation Department
Drug Free Idaho	Say No Idaho
Kamiah Community Partners Coalition	5 th Judicial District Court
Idaho State Department of Education	Ada County Prosecutor's Office
Idaho Department of Health and Welfare	Idaho Legislature
Enforcing Underage Drinking Laws	Idaho Medical Association
Idaho Prosecutor's Association	Ada County Coroner
Idaho Drug Free Youth	Idaho State Board of Medicine
Idaho Department of Juvenile Corrections	Idaho State Board of Nursing
Idaho Meth Project	Idaho State Board of Pharmacy
Project Filter	Boise State University
Idaho Conference and Alcohol and Drug Dependency	Idaho State Board of Dentistry
Idaho Crime Prevention Association	Idaho Hospital Association
Idaho State Liquor Division	Nurse Practitioners of Idaho
Supportive Housing and Innovative Partnerships	Boise City Attorney's Office
Leadership to Keep Children Alcohol Free	City of Boise Public Works



III. Transformation of Idaho's Prevention System

Transformation of the Office of Drug Policy

The Office of Drug Policy (ODP) has experienced considerable change since its inception in 2007. For its first four years, ODP oversaw the Interagency Committee on Substance Abuse, a partnership with Idaho Department of Health and Welfare, the judiciary, criminal justice agencies and local government. Through this Committee, ODP led the coordination of agencies involved in Idaho's community-based substance use disorder treatment system. However, with the sunset of the Interagency Committee on Substance Abuse, the Office is focusing on substance abuse policy and prevention.



Although the focus has moved away from the coordination of Idaho's treatment system, ODP has been thoroughly involved in Idaho's drug policy, and the prevention and enforcement of alcohol and substance abuse. ODP was instrumental in research and development of legislation which banned synthetic cannabinoids (marijuana) and cathinones (stimulants). With the support of the State Strategic Planning Committee, ODP led the creation and implementation of a state-wide campaign against underage drinking called "Be The Parents". ODP is well-equipped for this work and determined to make effective change on the issues related to drug abuse and underage drinking. This renewed focus is in keeping with the statute governing ODP, and as such, the following goals have been established.

Although the focus has moved away from the coordination of Idaho's treatment system, ODP has been thoroughly involved in Idaho's drug policy, and the prevention and enforcement of alcohol and substance abuse. ODP was instrumental in research and development of legislation which banned synthetic cannabinoids (marijuana) and cathinones (stimulants). With the support of the State Strategic Planning Committee, ODP led the creation and implementation of a state-wide campaign against underage drinking called "Be The Parents". ODP is well-equipped for this work and determined to make effective change on the issues related to drug abuse and underage drinking. This renewed focus is in keeping with the statute governing ODP, and as such, the following goals have been established.

Goal 1: ODP will increase collaboration and partnerships with counties, cities, and local law enforcement to combat substance abuse issues.

Objective A) Establish relationships with key representatives within counties, cities, and local law enforcement

Objective B) Establish ODP as a credible, knowledgeable resource to counties, cities, and local law enforcement

The most powerful and significant change often occurs at the local level. Because of this, it is critical that ODP actively engage elected officials and key representatives from counties, cities, and law enforcement agencies. These community leaders have the best knowledge about what is occurring in their communities with regard to drug abuse, and these relationships will assist ODP in keeping up to date on current drug trends. Strengthened relationships will enable the Office to assist local communities in planning and implementing effective strategies. ODP will also serve as a liaison between local governments who would like to take action and Idaho organizations that have experienced success in these same areas. By facilitating these types of relationships, ODP ensures that services are not overlapping or duplicated and limited resources are not wasted.

Goal 2: Establish the Office of Drug Policy as a source of substance abuse prevention information and coordinate the exchange of such information.

Objective A) Research, identify, and store plans, strategies, and evidence-based programs regarding substance abuse prevention and make available to stakeholders throughout Idaho.

Objective B) Coordinate the exchange of substance abuse prevention information with the Office of National Drug Control Policy, other state offices of drug policy, and prevention organizations throughout the state

ODP has had much success in gathering and generating prevention information and materials and making them available to local communities throughout Idaho via mail, email, and the internet. The Office will continue to host and maintain www.odp.idaho.gov and www.betheparents.org, Facebook pages for ODP and Be The Parents, as well as distribute quarterly ODP newsletters and monthly Be The Parents email blasts. These efforts will communicate the most recent and relevant information to our stakeholders. Information will also be exchanged with similar state drug policy offices as well as the Office of National Drug Control Policy. In addition, ODP's participation in numerous committee and board meetings will provide opportunities to facilitate the exchange of information.

Goal 3: Educate and inform stakeholders regarding substance abuse policy issues.

Objective A) Research and provide current substance abuse related policy information to stakeholders, including communities, prevention organizations, elected officials, and the public.

ODP will ensure that executive, legislative and other policy-making bodies are aware of the most current information regarding illegal drugs. In this capacity, the Office will also review and comment on proposed federal, state, or local legislation, regulations, policies, or programs that affect substance abuse in Idaho as

deemed appropriate by the Governor. To assist our stakeholders in their efforts to stay abreast of policy issues, ODP will draft and publicize as-it-happens email updates on new legislation relevant to prevention issues.

Goal 4: Work collaboratively with stakeholders to decrease substance abuse in Idaho.

Objective A) Lead public and private entities in the development and implementation of a statewide strategic plan to combat substance abuse in Idaho

Objective B) Research, identify and apply for grants or other monies to fund strategies to decrease substance abuse in Idaho

ODP will continue to coordinate meetings of the State Strategic Prevention Planning Committee, and will begin the coordination of workgroups to analyze and strategize around the priority substance abuse issues identified by the Committee. These workgroups, consisting of individuals from various parts of the state and representing several sectors, will develop issue-specific logic models and action plans which will then be compiled to form the Idaho State Drug Prevention Strategy. This document will provide guidance to prevention providers throughout the state on those strategies deemed most effective and relevant in Idaho. As part of the statewide strategy, ODP will continue to coordinate the Be The Parents media campaign aimed at reducing underage drinking and seek funding to implement additional educational media campaigns each year.

The Goals of Transforming Idaho's Prevention System

- Community-directed prevention efforts
- Population-level change resulting from increased implementation of environmental strategies
- Science-based, strategic approach to prevention statewide as a result of following the Strategic Prevention Framework (SPF) as developed by the Substance Abuse and Mental Health Services Administration
- Increased communication and sharing of resources among prevention providers
- Prevention providers who are knowledgeable and trained regarding prevention science
- Stakeholders participating as members of Regional Behavior Health Boards or Regional Grant Review Boards will better understand prevention science
- More Idaho citizens will be reached by prevention efforts
- Vital data regarding substance abuse will be collected to inform prevention efforts
- Substance abuse will decrease
- Communities will be safer and healthier
- Federal, state and local governments will experience cost savings
- Lives will be saved



The Idaho State Drug Prevention Strategy

The plan for Idaho's statewide prevention system begins with the development of the Idaho State Drug Prevention Strategy. This document will be created by the Strategic State Prevention Planning Committee and its associated workgroups under the direction of ODP as outlined above. It will guide the efforts of prevention providers in Idaho to ensure prevention resources are applied to implement environmental or evidence-based strategies and to address the identified priority issues. This will result in a more focused, strategic approach to substance abuse issues throughout the state while allowing funding decisions for Prevention Transformation Grants to be made at the community level.

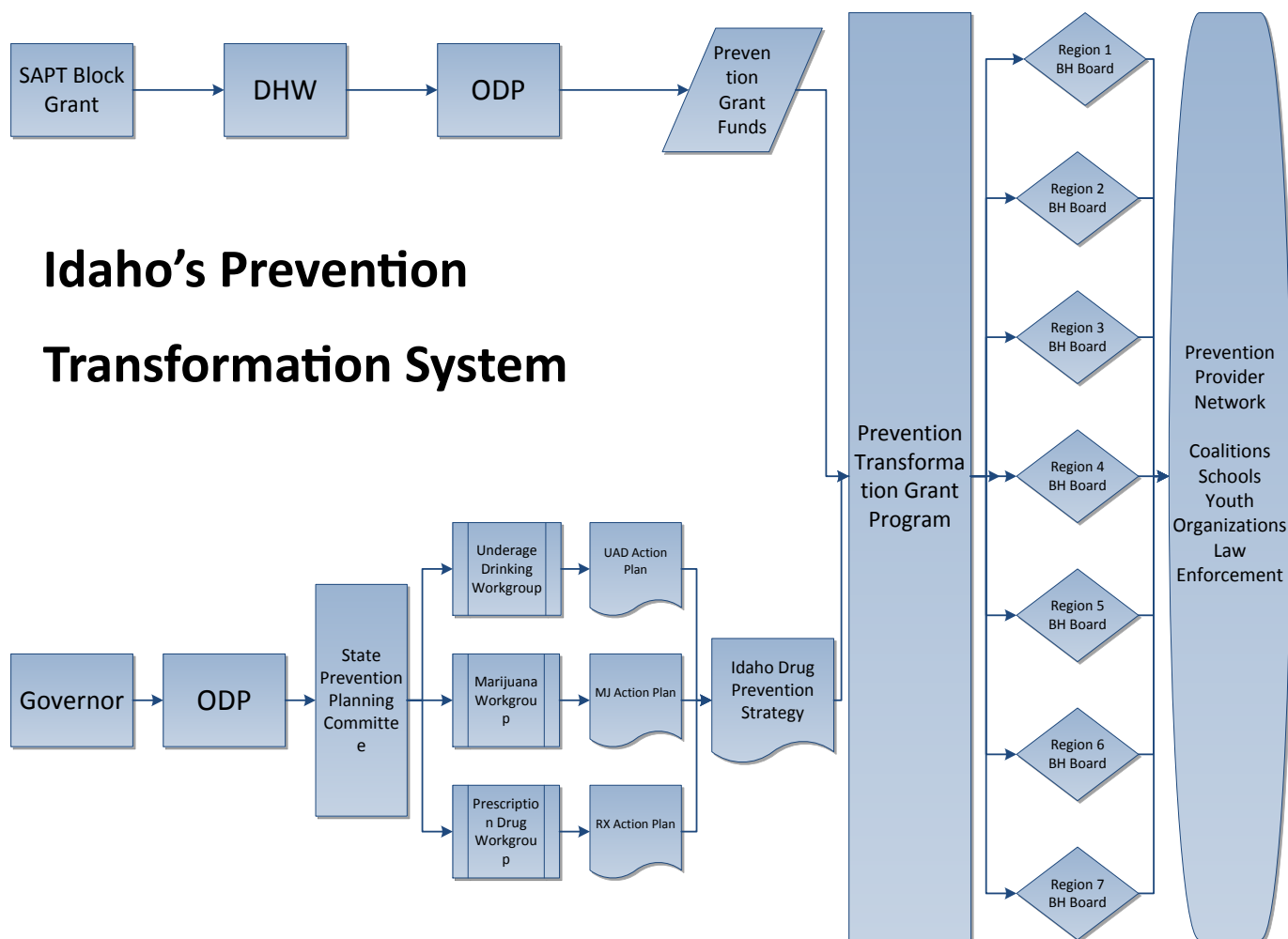
This transformation of Idaho's prevention system will allow for more Prevention Transformation Grant funds to pass through to communities for Universal, Selective, and Indicated prevention strategies. This will also provide for increased local control of prevention services by coordinating Regional Grant Review Boards that will make the local funding recommendations. Because local individuals are familiar with local efforts, programs, and organizations, they are best equipped to make those decisions.

All grant applicants will be required to follow the Strategic Prevention Framework (SPF) which will require more strategic and data driven planning. Training regarding this framework and its use will be offered to stakeholders prior to the funding application due date. Prevention work guided by the SPF will not only improve the focus and efficacy of prevention work, but it will also simplify the grant review process. A more unified, focused effort will be the result of ODP and workgroup members' from throughout the state using the most recent data to identify priority issues in the state, thoroughly analyzing these problems, and preparing strategic plans around these issues to guide the work of state, county, and local organizations.

Prevention Transformation Grants Program

Beginning July 1, 2013, the SAPT federal block grant funds that DHW receives for prevention efforts will be passed down to ODP to fund the Prevention Transformation Grants Program. This new approach to administer the prevention block grant dollars is outlined in the diagram below and will include the following steps:

1. ODP's Strategic State Prevention Planning Committee identifies priority issues in Idaho based on the available data. For FY14, these include underage drinking, marijuana use, and prescription drug abuse.
2. ODP forms workgroups to study, form logic models, and develop strategic action plans to address each issue.
3. The Underage Drinking Action Plan, Marijuana Use Action Plan, and Prescription Drug Abuse Action Plan are combined to form the Idaho Drug Prevention Strategy.



4. Regional Grant Review Boards are formed from members of Regional Advisory Committees, community coalitions, schools, law enforcement agencies, healthcare workers, or other community members with an identified interest or knowledge in substance abuse issues. If the Department of Health and Welfare proceeds in developing Regional Behavioral Health Boards, these entities will form a grant review committee.
5. ODP will train Regional Grant Review Boards regarding the Strategic Prevention Framework, environmental strategies, evidence-based programs, and the Idaho Drug Prevention Strategy.
6. A Request for Applications will be released.
7. Stakeholder meetings will be held for potential subgrantees to discuss the transformation of Idaho's prevention system and provide training regarding the Strategic Prevention Framework developed by SAMHSA. Subgrantees will be required to use the SPF as the basis of their prevention plans to demonstrate that prevention providers are properly educated regarding prevention science in order to ensure the most effective strategies are being funded.

8. Applicant organizations will submit their funding request to ODP, which will then distribute them to the appropriate Regional Grant Review Board.
9. Regional Grant Review Boards will review applications, rank them, and make funding recommendations.
10. ODP will make funding awards based on the ranking and recommendations of the Regional Grant Review Boards and available grant funds.
11. Grant cycles will begin on July 1 of each year in accordance with the State fiscal year.
12. ODP will provide new grantee training for each awarded organization, as well as continuing to provide training and technical assistance to applicant organizations and subgrantees throughout the course of the grant cycle.

IV. Considerations for the Future

Future Goals

The future is ripe with opportunities for prevention. ODP will work to identify additional funding sources for prevention strategies and work to secure those dollars. The Office will continue to support the work of local community coalitions and assist them in strengthening their efforts. The Community Coalitions of Idaho will be supported in their goal to increase the number of coalitions in Idaho until every child in the state is reached. A critical need exists for platforms to share information and resources. ODP will continue the current state platform and will work to find or establish one at the national level. Relevant to this is a website that ODP is planning which will provide training and technical assistance that can be accessed by prevention professionals at any time according to their needs. This will ensure those individuals working in communities have the knowledge and skills needed to perform their work at the highest level. Along with this, the Office will be re-searching certification options for prevention professionals, and determining if changes should be made in Idaho regarding such. Much work will be required to form Regional Behavioral Health Boards or Regional Grant Review Boards. The Office will support this endeavor.

Future Opportunities for Collaboration

ODP has benefitted greatly from collaborating with its partners and these efforts will continue to grow. Numerous opportunities for working together have been identified with partners at the Idaho State Police including reviewing current drug-related laws to identify antiquated policies or gaps, providing train the trainers information to coalitions wishing to provide server training, informing officers regarding new materials in the code

book, and developing training materials for alcohol licensees and making them available on-line. ISP and ODP also hope to work together to find solutions to increase the number of Drug Recognition Experts in the state.

Several opportunities for collaboration have been undertaken by the Department of Juvenile Corrections, Enforcing Underage Drinking Laws, and ODP and that will continue into the future. These organizations have plans to promote and expand server training programs and continue developing materials and promoting the Be The Parents campaign.

ODP and the Department of Health and Welfare have had a particularly productive partnership. Working together these agencies were able to revisit their missions and programs and determine the organization best equipped to administer each program. As a result some adjustments have been made to ensure that the stakeholders and clients of each program are best served. This working relationship will continue on in the future as ODP administers the prevention block grant funds that come to Idaho through DHW and both agencies work together to ensure that this program is efficient and effective. The two organizations will also continue to work together on a school survey tool, which effort is being led by DHW's Prevention and Treatment Research workgroup.

The State Liquor Division has been a strong partner with ODP and will continue to be so in the future. The Office will support their efforts to oppose deregulation of the alcohol industry in Idaho. It will also be vital that the organizations work together to keep alcohol products that are particularly attractive to youth out of Idaho, as well as posting training materials for alcohol licensees on the Division's website.

The Prescription Drug Workgroup has been a particularly invested group of organizations working toward decreasing prescription drug use in Idaho. This workgroup will continue to implement strategies detailed in their strategic action plan, evaluate those activities, and revise the plan as necessary. Member organizations include the Idaho Medical Association, Ada County Coroner's Office, Idaho House of Representatives, Idaho State Board of Medicine, Idaho State Board of Nursing, Idaho State Police, Meridian Police Department, Idaho State Board of Pharmacy, Supportive Housing and Innovative Partnerships, Boise State University, Idaho State Board of Dentistry, Idaho Hospital Association, Idaho Pharmacy Association, Nurse Practitioners of Idaho, Ada County Prosecutor's Office, and the City of Boise.

While many of the organizations that ODP partners with have been mentioned, this is certainly not an exhaustive list. ODP works closely with numerous community organizations, government agencies, and individuals. Future collaborations with any organization wishing to partner on strategies to reduce or prevent drug abuse, or those wishing to learn more about this issue, are potential partners.



References

- ¹Patton, G.C. et al. (2002). "Cannabis use and mental health in young people: cohort study." *British Medical Journal*, 325:1195-1198.
- ²Office of Applied Studies, Substance Abuse and Mental Health Services Administration. (1998). *National Household Survey on Drug Abuse*.
- ³Pacific Institute for Research and Evaluation. 2011.
- ⁴Brady, J.E. and Li, G. (2012). "Prevalence of alcohol and other drugs in fatally injured drivers." *Addiction*. doi: 10.1111/j.1360-0443.2012.03993.x.
- ⁵Southwest Prevention Center University of Oklahoma Outreach. (2004). *Cost Benefit of Prevention: Review of research literature*.
- ⁶Center for Defense Information at <http://www.cdi.org/budget/2004/world-military-spending.cfm>.
- ⁷Swisher, J.D., Scherer, J. and Yin, K. (October, 2004). "Cost-benefit estimates in prevention research." *The Journal of Primary Prevention*, 25:2.
- ⁸Benefits and Costs of Prevention and Early Intervention Programs for Youth. (2004). Washington State Institute for Public Policy at www.wsipp.wa.gov.
- ⁹Holder, H. (2000). "Community prevention of alcohol problems." *Addictive Behaviors*, 25:6, 929-942.